

INDIANA DEPARTMENT OF TRANSPORTATION
INDIANAPOLIS, INDIANA 46204
INTERDEPARTMENT COMMUNICATION

Date _____

REQUEST FOR TRAFFIC PROJECTIONS

MEMORANDUM

TO:

Traffic Statistics Unit Supervisor
Program Development Division

FROM:

(title)
(Division) (District)

ROUTE _____

DES. NO. _____

PROJECT NO. _____

_____ of _____ to _____ of _____

COUNTY: _____

For additional information contact _____; Telephone: _____.

Type of work planned: _____

Year for Traffic Projections: _____

The data requested is as follows:

Attached additional information to be returned: Yes No

[Please include any additional information that will prove helpful in fulfilling your request (i.e., Project Location Map, aerial photos, etc.).]